

PATENT
PD-0436 CIPIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of
James D. Holker et al.)
Serial No: 09/779,282)
Filed: February 8, 2001)
For: IMPROVED ANALYTE SENSOR AND
METHOD OF MAKING THE SAME)
Examiner: R. Maiorino
Art Unit: 3763

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the January 13, 2005 Office Action for the above-identified application, please enter and consider the following amendment and remarks.

I hereby certify that this correspondence is being facsimile transmitted to the
United States Patent and Trademark Office Fax No. (703) 872-9306:

April 13, 2005 Ajit S. Narang, Reg. No. 55,480
Date of facsimile Applicant, Assignee, or Registered Rep.


Signature

4/13/05
Date

FORM PTO-1083

PATENT

Docket: PD-0436 CIP
Date: April 13, 2005

In re the application of: Jamed D. Holker et al.

Serial No.: 09/779,282

Filed: February 8, 2001

For: IMPROVED ANALYTE SENSOR AND METHOD OF MAKING THE SAME

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office Fax No. (703) 872-9306:

April 13, 2005	Ajit S. Narang, Reg. No. 55,480		4/13/05
Date of facsimile	Applicant, Assignee, or Registered Rep.	Signature	Date

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application;

The fee has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY			OTHER THAN A SMALL ENTITY		
CLAIMS								
REMAINING AFTER AMENDMENT	HIGHEST NO PREVIOUSLY PAID FOR EXTRA	PRESENT	RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE	
TOTAL	16	MINUS	20	-	0-		x 18	\$-0-
INDEP CLAIMS	2	MINUS	3	-	0-		x 78	\$-0-
[] FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+135			+270	\$-0-

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

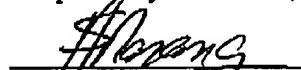
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0621. A copy of this sheet is enclosed.

Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,


 Ajit S. Narang

Registration No. 55,480

MEDTRONIC MINIMED, INC.
 18000 Devonshire Street
 Northridge, CA 91325-1219
 Telephone: (818) 576-5003; Facsimile: (818) 576-6202

Via Facsimile to (703) 872-9306 -- 9 pages including transmittal